

AGENDA AND REPORTS MAY 15, 2025 ZOOM CONFERENCE CALL 12:00 PM

ZOOM: https://permainc.zoom.us/j/99164290246

Meeting ID: 991 6429 0246 One tap mobile +13092053325,,99164290246# US +13126266799,,99164290246# US (Chicago)

OPEN PUBLIC MEETINGS ACT - In accordance with the Open Public Meetings Act, notice of this meeting was given by:

- I. Sending sufficient notice to <u>The Record and The Star Ledger</u>
- **II.** Filing advance written notice of this meeting with the Clerk/Administrator of each member municipality and school boards,
- **III.** Posting notice on the Public Bulletin Board of all member municipalities and school boards.

IV. During the business session portion of this Remote Public Meeting, the audio of all members of the public meeting will be muted. At the end of the business session of the meeting, a time for public comment will be available. Members of the public who desire to provide comment shall raise their virtual hand in the Zoom application and/or submit a written comment via the text message section of the application. The meeting moderator will queue the members of the public that wish to provide comment and the Chairperson will recognize them in order. Public comment shall be concise and to the point, and shall not contain abusive, defamatory, or obscene language.

METROPOLITIAN HEALTH INSURANCE FUND AGENDA MEETING: MAY 15, 2025 CONFERENCE CALL - ZOOM 11:00 AM

MEETING CALLED TO ORDER - OPEN PUBLIC MEETING NOTICE READ

PLEDGE OF ALLEGENCE

ROLL CALL OF 2025 EXECUTIVE COMMITTEE

Fund Commissioner	<u>Entity</u>	
Jenny Mundell, Chairwoman	Bloomfield Public Library	
Kimberly Duva, Secretary	Bloomfield Township	
Cameron Cox, Executive Committee Member	Plainfield Public Schools	
Nikole Baltycki, Executive Committee Member	West Caldwell Township	
Chris Hartwyk, Executive Committee Member	City of Orange	
Margaret Heisey, Executive Committee Member	Scotch Plains Twp	
Patrick Wherry, Executive Committee Member	Maplewood Township	
 CORRESPONDENCE - None EXECUTIVE DIRECTOR - PERMA - Brandon Executive Director's Report PROGRAM MANAGER - PERMA - Crystal Ba Executive Director's Report 	ailey	-
FUND COODINATOR – Eagle Rock Managem Fund Coordinator's Report Executive I ATTORNEY – Ramon Rivera	ent Group – Joseph DiVince	enzo
ATTORNET - Ramon Rivera		
TREASURER – Laracy Associates Voucher List April and May 2025 Resolution 17-25: Approval of the April and		
THIRD PARTY ADMINISTRATOR - Aetna -		_
Monthly Report	••••••••••••••••••	Page 25

PRESCRIPTION PROVIDER - Express	s Scripts – Charles Yuk
Monthly Report	Page 33

DENTAL ADMINISTRATOR - Delta Dental - Crista O'Donnell
Monthly ReportPage 37

OLD BUSINESS

NEW BUSINESS

PUBLIC COMMENT

MEETING ADJOURNED

Metropolitan Health Insurance Fund Executive Director's Report May 15, 2025

FINANCES

PRO FORMA REPORTS

- Fast Track Financial Reports As of January 31, February 28, and March 31, 2025 (page 6)
 - Historical Income Statement
 - Consolidated Balance Sheet
 - Indices and Ratios Report

2024 FUND YEAR AUDIT

PERMA has recently engaged the auditor to begin the Financial Audit Report for Year End 2024. Since it was the Fund's first year in 2024 and the auditor relationship is new to PERMA, this report may take longer than usual.

We are asking the Finance Committee to review and accept the report should it be complete before the filing deadline. Otherwise, we may ask the State for a one-month extension and the Executive Committee can review and approve at the July meeting.

MOTION: Motion to allow the finance committee to review the Fund Year 2024 Financial Audit for approval and filing or extension request to the State of New Jersey.

GASB 75

The Fund contracts with an Actuary to provide GASB 75 reports on behalf of its medical members. Please reach out to Jordyn Robinson (<u>jrobinson@permainc.com</u>) if your audit requires a full report or update to last year's report. During its 'busy' season, reports can take up to six weeks to turn around.

INDEMNITY AND TRUST AGREEMENTS

PERMA sent Indemnity and Trust Agreements and Resolutions to be adopted by the governing bodies to renew membership with the Fund for an additional 3 years. Below is a list of members who have renewing agreements have expired. Please reach out to <u>hifadmin@permainc.com</u> for a blank form to be executed. The list was last updated on May 5, 2025.

MEMBER	I&T Agreement Expiration
Plainfield BOE	6/30/2024
Morristown	6/30/2025

IMPORTANT FUND INFORMATION

Website: www.metrohif.com W-9: Appendix II Address: 9 Campus Drive, Suite 216, Parsippany, NJ 07054 EIN: 93-4065414 HIF Admin: hifadmin@permainc.com

PERMA, LLC. NOTICE AND DISCLOSURE

Pursuant to N.J.A.C Title 11, Chapter 15, Subchapter 5, PERMA, LLC ("PERMA"), as administrator of the **Metropolitan Health Insurance Fund** ("the Fund"), and its employees, officers and directors hereby provide notice that they have direct and indirect financial interests in Conner Strong & Buckelew Companies, LLC, which is a servicing organization for the Fund.

				L EMPLOYEE BENEI FAST TRACK REPORT		
			AS OF	January 31, 2025		
			THIS	YTD	PRIOR	FUND
			MONTH	CHANGE	YEAR END	FUND BALANCE
UNDER		OME	6,858,644	6,858,644	207,950,683	214,809,32
CLAIM E	XPENSES					
Pa	aid Claims		6,353,824	6,353,824	180,131,885	186,485,70
IB	BNR		177,664	177,664	6,202,000	6,379,6
Le	ess Specific Exce	SS	(312,202)	(312,202)	(5,740,079)	(6,052,23
Le	ess Aggregate Ex	cess	-	-	-	-
TOTAL	CLAIMS		6,219,286	6,219,286	180,593,806	186,813,09
EXPENSE						
	1A & HMO Premi	ums	862,556	862,556	15,510,298	16,372,8
	xcess Premiums		207,481	207,481	3,986,606	4,194,0
	dministrative		484,606	484,606	11,349,468	11,834,0
TOTAL	EXPENSES		1,554,642	1,554,642	30,846,371	32,401,01
UNDERV	WRITING PROFIT	/(LOSS) (1-2-3)	(915,285)	(915,285)	(3,489,494)	(4,404,7
	MENT INCOME		23,640	23,640	603,103	626,7
	ID INCOME					
STATUT	ORY PROFIT/(LO	SS) (4+5+6)	(891,645)	(891,645)	(2,886,391)	(3,778,03
DIVIDEN	ID		-	- 1	-	-
Transfer	rred Surplus IN		-	-	-	-
Transfer	rred Surplus OU	Г	-	-	-	-
STATU	TORY SURPLU	S (7-8+9)	(891,645)	(891,645)	(2,886,391)	(3,778,03
			SURPLUS (DEF	ICITS) BY FUND YEAR		
Closed		Surplus	(31,961)	(31,961)	6,445,636	6,413,6
closed		Cash	(33,137)	(33,137)	6,399,926	6,366,7
2023		Surplus	(155,843)	(155,843)	(6,529,177)	(6,685,0
		Cash	(35,902)	(35,902)	(5,462,067)	(5,497,9
2024		Surplus	(432,857)	(432,857)	(2,802,851)	(3,235,7
		Cash	(3,614,944)	(3,614,944)	2,904,238	(710,7
2025		Surplus	(270,983)	(270,983)		(270,9
		Cash	6,302,359	6,302,359		6,302,3
OTAL SU	RPLUS (DEFICI	TS)	(891,645)	(891,645)	(2,886,392)	(3,778,03
TAL CA	SH		2,618,375	2,618,375	3,842,097	6,460,4
			CLAIM ANAL	YSIS BY FUND YEAR		
TOTAL C	CLOSED YEAR CL	AIMS	38,200	38,200	52,434,149	52,472,3
FUND YE	EAR 2023					
Pa	aid Claims		156,422	156,422	65,699,417	65,855,8
IB	BNR		-	-	-	
Le	ess Specific Exce	SS	-	-	(3,609,371)	(3,609,3
Le	ess Aggregate Ex	cess	-	-	-	
TOTAL F	Y 2023 CLAIMS		156,422	156,422	62,090,046	62,246,4
FUND YE	EAR 2024					
	aid Claims		3,919,151	3,919,151	60,757,659	64,676,8
Pa	BNR		(3,163,020)	(3,163,020)	6,202,000	3,038,9
	ess Specific Exce		(312,202)	(312,202)	(890,049)	(1,202,2
IB Le		cess	-	-	-	
IB Le Le	ess Aggregate Ex		443,929	443,929	66,069,610	66,513,5
IB Le Le TOTAL F	Y 2024 CLAIMS					
IB Le TOTAL F FUND YE	Y 2024 CLAIMS EAR 2025		2 240 054	2 240 054		2,240,0
IB Le TOTAL F FUND YE Pa	EX 2024 CLAIMS EAR 2025 aid Claims		2,240,051	2,240,051		
IB Le Le FOTAL F FUND YE Pa IB	EY 2024 CLAIMS EAR 2025 aid Claims BNR		2,240,051 3,340,684	2,240,051 3,340,684		
IB Le Le TOTAL F FUND YE Pa IB Le	EY 2024 CLAIMS EAR 2025 aid Claims BNR ess Specific Exce			3,340,684		
IB Le Le TOTAL F FUND YE Pa IB Le Le	Y 2024 CLAIMS EAR 2025 aid Claims BNR ess Specific Exce ess Aggregate Ex		3,340,684	3,340,684		3,340,6
IB Le Le TOTAL F FUND YE Pa IB Le Le	EY 2024 CLAIMS EAR 2025 aid Claims BNR ess Specific Exce			3,340,684		3,340,6 5,580,7

This report is based upon information which has not been audited nor certified by an actuary and as such may not truly represent the condition of the fund.

		11111		L EMPLOYEE BENEI L FAST TRACK REPORT		
			AS OF	February 28, 2025		
			THIS MONTH	YTD CHANGE	PRIOR YEAR END	FUND BALANCE
. UND	DERWRITING INC	ΟΜΕ	7,264,030	14,122,674	207,950,683	222,073,357
2. CLAIN	VI EXPENSES					
	Paid Claims		5,319,100	11,672,924	180,131,885	191,804,809
	IBNR		187,545	365,209	6,202,000	6,567,209
	Less Specific Exces	SS	-	(312,202)	(5,740,079)	(6,052,280
	Less Aggregate Ex	cess	-	-	-	-
TOT	AL CLAIMS		5,506,645	11,725,932	180,593,806	192,319,738
. EXPEN	NSES					
	MA & HMO Premiu	ums	965,852	1,828,408	15,510,298	17,338,70
	Excess Premiums		207,481	414,962	3,986,606	4,401,56
	Administrative		509,833	994,439	11,349,468	12,343,90
TOT	AL EXPENSES		1,683,167	3,237,809	30,846,371	34,084,180
		/// 055) /1 2 2)				
	ERWRITING PROFIT, STMENT INCOME	(1033) (1-2-3)	74,218	(841,067) 50,465	(3,489,494)	(4,330,56 653,56
			26,825	50,405	603,103	053,50
			-	-	(2.990.204)	-
. STAT	UTORY PROFIT/(LO	SS) (4+5+6)	101,042	(790,602)	(2,886,391)	(3,676,994
DIVID	DEND		-	-	-	-
Trong	sferred Surplus IN					
	-		-	-	-	-
	sferred Surplus OU		-	-	-	-
STAT	TUTORY SURPLU	S (7-8+9)	101,042	(790,602)	(2,886,391)	(3,676,99
			SURPLUS (DE	FICITS) BY FUND YEAR		
Close	h	Surplus	35,839	3,878	6,445,636	6,449,51
ciose		Cash	78,900	45,763	6,399,926	6,445,68
2023		Surplus	(131,412)	(287,255)	(6,529,177)	(6,816,43
		Cash	(130,983)	(166,885)	(5,462,067)	(5,628,95
2024		Surplus	(539,070)	(971,927)	(2,802,851)	(3,774,77
		Cash	(2,060,768)	(5,675,712)	2,904,238	(2,771,47
2025		Surplus	735,685	464,702	,	464,70
		Cash	2,777,060	9,079,419		9,079,41
	SURPLUS (DEFICI	1	101,042	(790,602)	(2,886,392)	(3,676,994
TOTAL	-	13)	664,209	3,282,584	3,842,097	7,124,682
UTAL	САЗП		·	· · ·	5,042,097	7,124,00.
			CLAIIVI ANAL	YSIS BY FUND YEAR		
TOTA	AL CLOSED YEAR CLA	AIMS	(25,842)	12,358	52,434,149	52,446,50
FUND	O YEAR 2023					
	Paid Claims		132,346	288,768	65,699,417	65,988,18
	IBNR		-	-	-	-
	Less Specific Exces	SS	-	-	(3,609,371)	(3,609,37
	Less Aggregate Ex	cess	-	-	-	-
TOTA	AL FY 2023 CLAIMS		132,346	288,768	62,090,046	62,378,81
	O YEAR 2024					
			1,969,161	5,888,312	60,757,659	66,645,97
	Paid Claims		(1,426,460)	(4,589,480)	6,202,000	1,612,52
	Paid Claims IBNR			(312,202)	(890,049)	(1,202,25
	IBNR	SS	-			
			-	-	-	-
FUND	IBNR Less Specific Exces		- - 542,701	- 986,630	- 66,069,610	67,056.24
FUND	IBNR Less Specific Exces Less Aggregate Ex		-		- 66,069,610	- 67,056,24
FUND	IBNR Less Specific Exces Less Aggregate Ex AL FY 2024 CLAIMS		-		66,069,610	
FUND	IBNR Less Specific Exces Less Aggregate Ex AL FY 2024 CLAIMS D YEAR 2025		- 542,701 3,243,435	- 986,630 5,483,486	- 66,069,610	5,483,48
FUND	IBNR Less Specific Exces Less Aggregate Ex AL FY 2024 CLAIMS O YEAR 2025 Paid Claims IBNR		- 542,701	986,630	- 66,069,610	5,483,48
FUND	IBNR Less Specific Exces Less Aggregate Ex AL FY 2024 CLAIMS YEAR 2025 Paid Claims IBNR Less Specific Exces	CCESS	- 542,701 3,243,435 1,614,005	- 986,630 5,483,486	- 66,069,610	5,483,48
FUND	IBNR Less Specific Exces Less Aggregate Ex AL FY 2024 CLAIMS O YEAR 2025 Paid Claims IBNR	CCESS	- 542,701 3,243,435 1,614,005	- 986,630 5,483,486	- 66,069,610	- 67,056,24 5,483,48 4,954,68 - - 10,438,17

This report is based upon information which has not been audited nor certified by an actuary and as such may not truly represent the condition of the fund.

			RO MUNICIPAL	FAST TRACK REPORT		
			AS OF	March 31, 2025		
			T 1110		20102	511410
			THIS MONTH	YTD CHANGE	PRIOR YEAR END	FUND BALANCE
. UN	IDERWRITING INCO	ОМЕ	7,185,950	21,308,623	207,950,683	229,259,307
. CLA	AIM EXPENSES					
	Paid Claims		5,908,283	17,581,207	180,131,885	197,713,09
	IBNR		226,589	591,798	6,202,000	6,793,79
	Less Specific Exces	s	(223,402)	(535,603)	(5,740,079)	(6,275,68
	Less Aggregate Exc		-	-	-	-
то	TAL CLAIMS		5,911,470	17,637,402	180,593,806	198,231,20
-	PENSES		-,,			
	MA & HMO Premiu	ims	1,159,191	2,987,599	15,510,298	18,497,89
	Excess Premiums		218,092	633,054	3,986,606	4,619,66
	Administrative		471,613	1,466,052	11,349,468	12,815,51
то	TAL EXPENSES		1,848,896	5,086,705	30,846,371	35,933,07
-						
	DERWRITING PROFIT	(LUSS) (1-2-3)	(574,417)	(1,415,484)	(3,489,494)	(4,904,97
			27,296	77,761	603,103	680,86
			-	-	-	-
. STA	ATUTORY PROFIT/(LOS	SS) (4+5+6)	(547,121)	(1,337,723)	(2,886,391)	(4,224,11
. DIV	IDEND		-	-	-	_
	motormod Course in the					
. Tra	nsferred Surplus IN		-	-	-	-
0. Tra	nsferred Surplus OUT	•	-	-	-	-
ST/	ATUTORY SURPLUS	S (7-8+9)	(547,121)	(1,337,723)	(2,886,391)	(4,224,11
			SURPLUS (DEEK	CITS) BY FUND YEAR		
Clos	cod	Surplus	(17,812)	(13,934)	6,445,636	6,431,70
CIU	seu	Cash	(19,290)	26,473	6,399,926	6,426,39
202	2	Surplus	181,184	(106,071)	(6,529,177)	(6,635,24
		Cash	(42,355)	(209,240)	(5,462,067)	(5,671,30
202	24	Surplus	(314,848)	(1,286,775)	(2,802,851)	(4,089,62
		Cash	(1,246,216)	(6,921,928)	2,904,238	(4,017,69
202	25	Surplus	(395,644)	69,058	2,001,200	69,0
		Cash	1,396,668	10,476,087		10,476,08
ΟΤΛΙ	L SURPLUS (DEFICIT		(547,121)	(1,337,723)	(2,886,392)	(4,224,11
	L CASH	13)	88,807	3,371,392		7,213,48
UTAI	САЗП			· · ·	3,842,097	7,213,40
			CLAIM ANALYS	SIS BY FUND YEAR		
тот	TAL CLOSED YEAR CLA	IMS	24,266	36,624	52,434,149	52,470,77
	TAL CLOSED YEAR CLA ND YEAR 2023	NIMS	24,266	36,624	52,434,149	52,470,77
		NIMS	24,266 42,815	36,624 331,583	52,434,149 65,699,417	
	ND YEAR 2023					
	ND YEAR 2023 Paid Claims					66,031,00 -
	ND YEAR 2023 Paid Claims IBNR	S S	42,815	331,583	65,699,417 -	66,031,00 -
FUN	ND YEAR 2023 Paid Claims IBNR Less Specific Exces	S S	42,815	331,583	65,699,417 -	66,031,00 - (3,832,7 -
FUN	VEAR 2023 Paid Claims IBNR Less Specific Exces Less Aggregate Exc	S S	42,815 - (223,402) -	331,583 - (223,402) -	65,699,417 - (3,609,371) -	66,031,00 - (3,832,77 -
FUN	ND YEAR 2023 Paid Claims IBNR Less Specific Exces Less Aggregate Exc TAL FY 2023 CLAIMS	S S	42,815 - (223,402) -	331,583 - (223,402) -	65,699,417 - (3,609,371) -	66,031,00 - (3,832,77 - 62,198,22
FUN	ND YEAR 2023 Paid Claims IBNR Less Specific Exces Less Aggregate Exc TAL FY 2023 CLAIMS ND YEAR 2024	S S	42,815 - (223,402) - (180,587)	331,583 - (223,402) - 108,181	65,699,417 - (3,609,371) - 62,090,046	66,031,00 - (3,832,77 - 62,198,22 67,645,00
FUN	ND YEAR 2023 Paid Claims IBNR Less Specific Exces Less Aggregate Exc TAL FY 2023 CLAIMS ND YEAR 2024 Paid Claims	iss	42,815 - (223,402) - (180,587) 999,096	331,583 - (223,402) - 108,181 6,887,407	65,699,417 - (3,609,371) - 62,090,046 60,757,659	66,031,00 - (3,832,77 - 62,198,23 67,645,00 930,30
FUN	ND YEAR 2023 Paid Claims IBNR Less Specific Exces Less Aggregate Exc TAL FY 2023 CLAIMS ND YEAR 2024 Paid Claims IBNR	ss cess cess cess cess cess cess cess c	42,815 - (223,402) - (180,587) 999,096 (682,220)	331,583 - (223,402) - - 108,181 - - 6,887,407 (5,271,700)	65,699,417 - (3,609,371) - 62,090,046 60,757,659 6,202,000	66,031,00 - (3,832,77 - 62,198,23 67,645,00 930,30
TOT	ND YEAR 2023 Paid Claims IBNR Less Specific Exces Less Aggregate Exc TAL FY 2023 CLAIMS ND YEAR 2024 Paid Claims IBNR Less Specific Exces	ss cess cess cess cess cess cess cess c	42,815 - (223,402) - (180,587) 999,096 (682,220)	331,583 - (223,402) - - 108,181 - - 6,887,407 (5,271,700)	65,699,417 - (3,609,371) - 62,090,046 60,757,659 6,202,000	66,031,00 - (3,832,7: - 62,198,2: 67,645,00 930,30 (1,202,2: -
FUN TOT FUN	ND YEAR 2023 Paid Claims IBNR Less Specific Exces Less Aggregate Exc TAL FY 2023 CLAIMS ND YEAR 2024 Paid Claims IBNR Less Specific Exces Less Aggregate Exc	ss cess cess cess cess cess cess cess c	42,815 - (223,402) - (180,587) 999,096 (682,220) - -	331,583 - (223,402) - - 108,181 - - 6,887,407 (5,271,700) (312,202) -	65,699,417 - (3,609,371) - 62,090,046 60,757,659 6,202,000 (890,049) -	66,031,00 - (3,832,7: - 62,198,2: 67,645,00 930,30 (1,202,2: -
FUN TOT FUN	ND YEAR 2023 Paid Claims IBNR Less Specific Exces Less Aggregate Exc TAL FY 2023 CLAIMS ND YEAR 2024 Paid Claims IBNR Less Specific Exces Less Aggregate Exc TAL FY 2024 CLAIMS	ss cess cess cess cess cess cess cess c	42,815 - (223,402) - (180,587) 999,096 (682,220) - -	331,583 - (223,402) - - 108,181 - - 6,887,407 (5,271,700) (312,202) -	65,699,417 - (3,609,371) - 62,090,046 60,757,659 6,202,000 (890,049) -	66,031,00 - (3,832,7) - 62,198,23 67,645,00 930,30 (1,202,2) - - 67,373,11
FUN TOT FUN	ND YEAR 2023 Paid Claims IBNR Less Specific Exces Less Aggregate Exc TAL FY 2023 CLAIMS ND YEAR 2024 Paid Claims IBNR Less Specific Exces Less Aggregate Exc TAL FY 2024 CLAIMS ND YEAR 2025	ss cess cess cess cess cess cess cess c	42,815 - (223,402) - (180,587) 999,096 (682,220) - - 316,876	331,583 - (223,402) - 108,181 6,887,407 (5,271,700) (312,202) - - 1,303,506	65,699,417 - (3,609,371) - 62,090,046 60,757,659 6,202,000 (890,049) -	66,031,00 - (3,832,7: - 62,198,2: 67,645,00 930,31 (1,202,2: - - 67,373,1: 10,325,55
FUN TOT FUN	ND YEAR 2023 Paid Claims IBNR Less Specific Exces Less Aggregate Exc TAL FY 2023 CLAIMS ND YEAR 2024 Paid Claims IBNR Less Specific Exces Less Aggregate Exc TAL FY 2024 CLAIMS ND YEAR 2025 Paid Claims IBNR	SCESS	42,815 - (223,402) - (180,587) 999,096 (682,220) - - 316,876 4,842,106	331,583 - (223,402) - - 108,181 - - - - - - - - - - - - - - - - - -	65,699,417 - (3,609,371) - 62,090,046 60,757,659 6,202,000 (890,049) -	66,031,00 - (3,832,7: - 62,198,22 67,645,00 930,30 (1,202,2: - - 67,373,1: 10,325,55
FUN TOT FUN	ND YEAR 2023 Paid Claims IBNR Less Specific Exces Less Aggregate Exc TAL FY 2023 CLAIMS ND YEAR 2024 Paid Claims IBNR Less Specific Exces Less Aggregate Exc TAL FY 2024 CLAIMS ND YEAR 2025 Paid Claims	S S S S S S S S S S S S S S S S S S S	42,815 (223,402) (223,402) (180,587) 999,096 (682,220) - - 316,876 4,842,106 908,809	331,583 - (223,402) - - 108,181 - - - - - - - - - - - - - - - - - -	65,699,417 - (3,609,371) - 62,090,046 60,757,659 6,202,000 (890,049) -	66,031,00 - (3,832,7: - 62,198,2: 67,645,00 930,31 (1,202,2: - - 67,373,1: 10,325,55
	ND YEAR 2023 Paid Claims IBNR Less Specific Exces Less Aggregate Exc TAL FY 2023 CLAIMS ND YEAR 2024 Paid Claims IBNR Less Specific Exces Less Aggregate Exc TAL FY 2024 CLAIMS ND YEAR 2025 Paid Claims IBNR Less Specific Exces	S S S S S S S S S S S S S S S S S S S	42,815 (223,402) (223,402) (180,587) 999,096 (682,220) - - 316,876 4,842,106 908,809	331,583 - (223,402) - - 108,181 - - - - - - - - - - - - - - - - - -	65,699,417 - (3,609,371) - 62,090,046 60,757,659 6,202,000 (890,049) -	52,470,77 66,031,00 - (3,832,77 - 62,198,22 67,645,06 930,30 (1,202,29 - - 67,373,11 10,325,59 5,863,49 - - - - - 16,189,09

This report is based upon information which has not been audited nor certified by an actuary and as such may not truly represent the condition of the fund.

RATIOS									
INDICES	2024		JAN		FEB		MAR	APR	MAY
Cash Position	3,842,097	ć	6,460,472	ć	7,124,681	ć	7,213,488		
IBNR	6,202,000		6,379,664		6,567,209		6,793,798		
Assets	5,041,139		4,666,942		5,010,026		4,759,502		
Liabilities	7,927,531		4,000,942		8,687,019		8,983,617		
Surplus	(2,886,392)		(3,778,036)		(3,676,994)		(4,224,114)		
Claims Paid Month	6,252,986	\$	6,353,824	\$	5,319,100	\$	5,908,283		
Claims Budget Month	4,614,842	\$	5,324,120	\$	5,465,452	\$	5,465,942		
Claims Paid YTD	72,784,814	\$	6,353,824	\$	11,672,924	\$	17,581,207		
Claims Budget YTD	62,899,992	\$	5,324,120	\$	10,789,572	\$	16,231,412		
RATIOS									
Cash Position to Claims Paid	0.61		1.02		1.34		1.22		
Claims Paid to Claims Budget Month	1.35		1.19		0.97		1.08		
Claims Paid to Claims Budget YTD	1.16		1.19		1.08		1.1		
Cash Position to IBNR	0.62		1.01		1.08		1.06		
Assets to Liabilities	0.64		0.55		0.58		0.53		
Surplus as Months of Claims	(0.63)		(0.71)		(0.67)		-0.77		
IBNR to Claims Budget Month	1.34		1.20		1.20		1.24		

METRO Fund 2025 Budget Report as of March 31, 2025

	Cumulative	Annualized	Latest filed	Cumulative	\$ Variance	% Variance
Expected Losses	Guindidu (C	1 1111011110 0	Latest file a	Expensed	\$ Turninee	, o , unance
				Lipeizeu		
Medical Claims Aetna	15,179,230	45,227,249	53,539,937	15,098,583	80,647	1%
Prescription Claims - Excl Bloomfield	985,604	3,990,126	1,961,095	733,206	(40,793)	
Prescription Formulary Rebates	(315,392)	(1,276,837)	/ /	Included Above in P		
Prescription Claims - Bloomfield	22,202	89,547		Included Above in P		
Dental Claims	359,769	911,875	1,023,681	357,302	2,467	1%
Subtotal	16,231,412	48,941,961	55,984,715	16,189,091	42,321	0%
HMO/DMO Premiums	8,665	18,253	27,646	15,109	(6,445)	-74%
Medicare Advantage / EGWP	2,985,617	12,022,592	9,304,294	2,972,490	13,127	0%
Reinsurance						
Specific	632,616	1,880,046	2,158,296	633,054	(438)	0%
Total Loss Fund	10 850 200	62 862 852	67 474 050	10 000 744	10 575	0.07
1 otal Loss Fund	19,858,309	62,862,852	67,474,950	19,809,744	48,565	0%
Surplus Retention Regeneration	200.000	800,000	800,000	0	200,000	0%
	200,000	000,000	000,000	0	200,000	070
Expenses						
Legal	7,650	30,600	30,600	7,050	600	8%
Treasurer	5,585	22,338	22,338	6,750	(1,166)	
Administrator/Benefits Consultant	232,659	776,592	793,661	232,559	100	0%
Risk Management Consultants	456,321	1,842,278	1,553,293	473,458	(17,136)	-4%
Fund Coordinator	231,488	756,521	748,272	231,240	248	0%
TPA - Claims Agent Aetna	285,242	847,698	1,021,816	285,439	(198)	0%
Dental TPA	18,884	49,986	48,737	18,864	20	0%
Actuary	4,463	17,850	17,850	4,460	3	0%
Auditor	5,610	22,440	22,440	5,610	-	0%
Benefits Consultant						
Board Advisor						
Claims Audit	10,000	40,000	40,000	9,999	1	0%
Medicare Advantage Implementation	0	0	0	0	-	
Subtotal Expenses	1,257,901	4,406,304	4,299,008	1,275,429	(17,528)	-1%
Miscelleneous and Special Services						
Misc/Cont	4,512	18,048	18,048	2,744	1,768	39%
Wellness, Disease, Case Management	25,000	100,000	100,000	17,980	7,020	28%
Affordable Care Act Taxes	3,879	11,529	13,235	3,848	31	
A4 Surcharge	159,143	319,780	638,598	158,807	336	0%
Plan Documents	2,500	10,000	10,000	0	2,500	100%
Subtotal Misc/Sp Svcs	195,034	459,357	779,881	183,379	11,655	6%
	1 / == 0.2 =			4 480 000	(= 0==)	
Total Expenses	1,452,935	4,865,660	5,078,888	1,458,808	(5,873)	0%
Total Budget	21,511,245	68,528,513	73,353,839	21,268,552	242,692	1%
I Utal Duuget	41,311,443	00,520,515	15,555,059	41,400,354	242,092	170

Metro Municipal Employee Benefits Fund CONSOLIDATED BALANCE SHEET AS OF MARCH 31, 2025

BY FUND YEAR

	METRO 2025	METRO 2024	METRO 2023	CLOSED YEAR	FUND BALANCE
ASSETS					
Cash & Cash Equivalents	10,476,087	(4,017,690)	(5,671,307)	6,426,399	7,213,488
Assesstments Receivable (Prepaid)	(3,828,230)	(279,096)	168,984	2,542	(3,935,800)
Interest Receivable	-	-	(472)	2,760	2,288
Specific Excess Receivable	-	771,054	-	-	771,054
Aggregate Excess Receivable	-	-	264,365	-	264,365
Dividend Receivable	-	-	-	-	-
Prepaid Admin Fees	-	-	-	-	-
Other Assets	328,918	1,512,007	(1,396,818)	-	444,107
Total Assets	6,976,774	(2,013,725)	(6,635,248)	6,431,702	4,759,502
LIABILITIES	222.000	004 540			1 054 (40
Accounts Payable	232,899	821,713	-	-	1,054,612
IBNR Reserve	5,863,498	930,300	-	-	6,793,798
A4 Retiree Surcharge	158,807	301,888	-	-	460,695
Dividends Payable	-	-	-	-	-
Retained Dividends	-	-	-	-	-
Accrued/Other Liabilities	652,511	22,000	-	-	674,511
Total Liabilities	6,907,716	2,075,901	-	-	8,983,617
EQUITY					
Surplus / (Deficit)	69,058	(4,089,626)	(6,635,248)	6,431,702	(4,224,114)
Total Equity	69,058	(4,089,626)	(6,635,248)	6,431,702	(4,224,114)
Total Liabilities & Equity	6,976,774	(2,013,725)	(6,635,248)	6,431,702	4,759,502
BALANCE	-	-	-	-	_

This report is based upon information which has not been audited nor certified

by an actuary and as such may not truly represent the condition of the fund.

Fund Year allocation of claims have been estimated.

METROPOLITAN HEALTH INSURANCE FUND YEAR: 2025

Monthly Items	<u>Filing Status</u>
Budget	Filed
Assessments	Filed
Actuarial Certification	Filed
Reinsurance Policies	Filed
Fund Commissioners	Filed
Fund Officers	Filed
Renewal Resolutions	Filed
Indemnity and Trust	Filed
New Members	Filed as New Members are approved
Withdrawals	Filed as Members Withdrawal
Risk Management Plan and By Laws	Filed
Cash Management Plan	Filed
Unaudited Financials	Filed through Q3 2024
Annual Audit	2024 to be filed
Budget Changes	N/A
Transfers	N/A
Additional Assessments	N/A
Professional Changes	N/A
Officer Changes	N/A
RMP Changes	N/A
Bylaw Amendments	N/A
Contracts	Filed
Benefit Changes	N/A

Metropolitan Health Insurance Fund Program Manager Report May 2025 Program Manager: PERMA

Operational Updates:

Eligibility/Enrollment:

Please direct any eligibility, enrollment, or system related questions to our dedicated Client Services Team:

- Alexander Koch, <u>akoch@permainc.com</u>, 856-552-4478
- Victoria Friday: vfriday@permainc.com, 856-552-4748

System training (new and refresher) is provided to all contacts with WEX access **every 3**rd **Wednesday at 10AM**. Please contact <u>HIFtraining@permainc.com</u> for additional information or to request an invite.

In the subject line of the email, please include *Training – Fund Name and Client Name*. Please be sure to add the date of the training you would like to attend in your email so an invite can be sent.

Coverage Updates:

Express Scrips Updates:

2025 National Preferred Formulary (NPF) and SaveOn – Effective 7/1/25

Brokers were sent the updated 2025 Formulary and Exclusions lists effective July 1, 2025, on April 23, 2025. There were 2 members of the METRO Fund impacted by the formulary change. Please reference the appendix for the updated lists. Please note the following:

NPF:

- NPF Exclusions List, please note the following:
 - **Humalog** excluded for members with a new prescription as of 1/1/25, members currently taking the drug will be excluded effective 1/1/26
 - Members should share the covered preferred alternatives provided in the list with their providers
 - The number of impacted members will be provided later in 2025
 - **Humira** excluded for members with a new prescription as of 1/1/25,

members currently taking the drug will be excluded effective 7/1/25

- Members should share the covered preferred alternatives provided in the listing with their providers
- Impacted members (2) will be notified by ESI. The notification will include covered preferred alternatives under the NPF

SaveOn – Effective 7/1/25

Brokers were sent the updated 2025 SaveOn List effective July 1, 2025, on May 6, 2025. Please note the following:

- Drugs highlighted in green (21) were added to the list effective July 1, 2025
- Drugs highlighted in red (5) were removed from the list effective July 1, 2025
 - There were no METRO members impacted by the drugs removed from the list

4Q2024 SaveOn Savings (3/1/2024 through 12/31/24)

In 4Q2024, the Metropolitan Health Insurance Fund saved \$70,600 for members enrolled in SaveOn, an additional \$17,524 in savings from 3Q2024. There are currently 9 participants in the program, an increase of 2 members compared to 3Q2024. In 2024, Metro Fund members who used SaveOn saved a total of \$784 in copays. The average savings per prescription to date was \$1,906. See Appendix for the full report.

Top Therapeutic Categories:

- Inflammatory Conditions
 - 6 members, totaling \$30,634 in savings (increase of 1 member from the prior period)
- Miscellaneous Diseases
 - 1 member, totaling \$12,534 (no change from the previous period)
- Multiple Sclerosis
 - o¹ member, totaling \$17, 439
- Cancer
 - 1 member, totaling \$9,993 (new from the previous period)

Encircle Program (GLP-1 Weight Loss)

Effective September 1, 2024:

• Members with new prescriptions, including renewal prescriptions for expired prior authorizations (PA), will need to meet the following criteria to be approved

for a GLP-1 weight loss medication:

- \circ BMI \geq 32 OR
- BMI between $27 \le 32$ WITH 2 or more documented comorbidities
- Members with an active approved PA prior to 9/1/2024 will be grandfathered
 - Upon renewal of their PA, members will need to meet the above BMI requirements to be considered for approval
- PA renewals will need to include documentation to support the above BMI requirements for all members, regardless of members have been approved in the past.

Effective January 1, 2025:

Members who have an approved PA (active and new) will need to meet the following guidelines:

- Members will receive a welcome kit from Omada free of charge. The kit includes a digital scale and information on downloading the mobile app and/or using the web browser. The scale is programmed to the member's ESI active account prior to delivery. The scale will record each weigh-in and will update the member's file automatically. Members must weigh-in a minimum of 4 times a month
- Members must engage with an assigned online Omada coach via a mobile application or web browser a minimum of 4 times a month

If members do not adhere to both of the requirements outlined above, the following month in which they are non-compliant, they will not be able to refill their weight loss prescription. Members will be required to complete the missing weigh-ins and/or online coaching engagement in order to refill their prescription.

2025 LEGISLATIVE REVIEW:

Medical and Rx Reporting: None

No Surprise Billing and Transparency Act- Continued Delays

The Health Insurance Funds, including Metropolitan, protect plan members from surprise billing with involuntary out of network balance bills with a hold harmless clause:

- Example: an in-network surgeon contracts with an out of network anesthesiologist. Should the out of network anesthesiologist balance bill the patient, the Funds would hold the member harmless, paying up to the invoiced amount. The law also imposes certain requirements on the Carriers, PBMs and healthcare providers. Many of these requirements continue to be delayed, but we will continue to work with the insurance providers to assure the Metropolitan HIF remains compliant.

- Issuing updated ID Cards with additional out of pocket information
- Providing transparency in coverage machine-readable files
- Providing price comparison tools
- Healthcare providers should work with insurance carriers to provide potential patients with good faith estimates of costs

Appeals:

Carrier Appeals:

Submission Date	Appeal Type	Appeal Number	Reason	Determination	Determination Date
04/24/2025	Medical/Aetna	2025 04 01	Anesthesia	Upheld	04/25/2025

IRO Submissions: None

Metro Small Claims Committee Appeals: None



Prospective Client	Agency	Funding Type	Network	Effective Date	Note(s)
Maplewood Twp	David Balken	Fully Insured	Delta Dental	6/1/2025	Closed Dental Population joining the pool effective 6/1/2025 - 140 members
Livingston Public Schools	IMAG, Acrisure	Fully Insured	Aetna	7/1/2025	DTQ due to immature claims
Glen Ridge Township	Fairview Insurance, FRP	SHEP	8CBS	7/1/2025	DTQ due to pharmacy
Rockaway Township	IMAG, Acrisure	Fully Insured	BCBS	7/1/2025	DTQ due to pharmacy
Roselle Public Schools	R.D. Parisi & Associates	Fully Insured	BCBS	7/1/2025	The Metro proposal is uncompetitive as BCBS is buying the FI business
Nutley Public Schools	IMAG, Acrisure	Self-Funded	BCBS	7/1/2025	The group is staying self-funded as the State Monitor said they can't accommodate the run out
North Caldwell Borough	R.D. Parisi & Associates	SHBP	BCBS	7/1/2025	The broker is presenting on 5/8 - 43 members
Jersey City	R.D. Parisi & Associates	Self-Funded	BCBS	9/1/2025	Aetna said the broker will have the proposal no later than 5/9 - 2500 members
South Orange Village	Brown & Brown	SHBP	BCBS	9/1/2025	Submitted to PERMA on 5/6
Town of Seacaucus	Fairview Insurance, FRP	SHBP	BCBS	10/1/2025	Waiting on Rx, no later than 5/30; BCBS Reports received
South Orange Maplewood BOE	Unknown	SEHBP	BCBS	10/1/2025	Group is deciding if they want to request their claims
North Bergen	Brown & Brown	Fully Insured	Aetna	1/1/2026	Eagle Rock to request claims from the broker of record
East Orange Township	Conner Strong	Self-Funded	Aetna	1/1/2026	Eagle Rock to request claims from the broker of record

Contact Information	Title	Email	Phone
Joseph DiVincenzo	President	joed@eaglerockmg.com	856-420-2989 x4685
Diane Romano	Senior Account Manager	dianer@eaglerockmg.com	856-420-2989 x3633
Thomas Kelly	Account Manager	tom@eaglerockmg.com	856-420-2989 x3938

METROPOLITAN HEALTH INSURANCE FUND BILLS LIST

APRIL 2025

WHEREAS, the Treasurer has certified that funding is available to pay the following bills:

BE IT RESOLVED that the Metropolitan Health Insurance Fund's Executive Board, hereby authorizes the Fund treasurer to issue warrants in payment of the following claims; and

FURTHER, that this authorization shall be made a permanent part of the records of the Fund.

FUND YEAR 2024

	VendorName	Comment	InvoiceAmount
	PERMA	RETIREE FIRST-UNION 11012024	5,304.00 5,304.00
	PERMA	ADMIN FEES 10/24	38,601.00 38,601.00
	PERM A	PROGRAM MANAGER 10/24	47,179.00 47,179.00
	PERM A	POSTAGE 09/24	149.36 149.36
	MUNICIPAL REINSURANCE H.I.F.	SPECIFIC REINSURANCE 10/24	183,646.49 183,646.49
	ACRISURE NJ PARTNERS INS SERVICES, LLC	REIMB. WELLPLAINFIELD Q3 Q4 2024 4/25	2,307.90 2,307.90
	DEPARTMENT OF TREASURY	2024 PCORI FEES INTEREST DUE 04/25	993.67 993.67
		TOTAL CHECKS 2024 TOTAL ACH-2024	277,187.75 993.67
		Total Payments FY 2024	278,181.42
<u>FUND YEAR 2025</u>	VendorName	Comment	<u>InvoiceAmount</u>
	THE CANNING GROUP LLC	QPA METRO 2025-04	166.67 166.67
	GANNETT NEW YORK NJ LOCALIQ GANNETT NEW YORK NJ LOCALIQ	A# 1488194 INV 7013890-11099380 3/6/25 A# 1488194 INV 7013890-11099291 3/6/25	66.08 138.24 204.32
	WELLNESS COACHES USA LLC	WELLNESS COACHES INV 38827 03-25-2025	9,280.00 9,280.00
	ACRISURE NJ PARTNERS INS. SERVICES, LLC	BROKER FEES 04/25	58,371.67 58,371.67
	BROWN & BROWN METRO, LLC	BROKER FEES 04/25	13,647.58 13,647.58
		CHECK TOTAL 2025	81,670.24

UNITED HEALTHCARE INS COMPANY	MEDICARE ADVANTAGE 04/25	84,925.90 84,925.90
AETNA HEALTH MANAGEMENT, LLC	MEDICARE ADVANTAGE 04/25	927,958.08 927,958.08
DELTA DENTAL INSURANCE COMPANY	DENTAL- BE006509329 F1-787190000 4/25	5,209.28 5,209.28
ACTUARIAL SOLUTIONS, LLC	ACTUARY FEES Q2 2025	4,460.00 4,460.00
POINT ACCOUNTING GROUP	TREASURER FEE 04/25	2,250.00 2,250.00
FAIRVIEW INSURANCE AGENCY ASSOCIATES	BROKER FEES 04/25	15,058.74 15,058.74
ACRISURE NJ PARTNERS INS. SERVICES, LLC	BROKER FEES 04/25	46,537.74 46,537.74
EAGLE ROCK MANAGEMENT GROUP, LLC	FUND COORDINATOR 04/25	78,023.00 78,023.00
DELTA DENTAL OF NEW JERSEY INC.	DENTAL TPA FEES 04/25	6,315.94 6,315.94
AETNA	MEDICAL TPA FEES 04/25	95,844.96 95,844.96
	ACH TOTAL-2025	1,266,583.64
	Total Payments FY 2025	1,348,253.88
	TOTAL PAYMENTS ALL FUND YEAR	1,626,435.30

Chairperson

Attest:

Dated:

I hereby certify the availability of sufficient unencumbered funds in the proper accounts to fully pay the above claims.

Treasurer

METROPOLITAN HEALTH INSURANCE FUND BILLS LIST

MAY 2025

WHEREAS, the Treasurer has certified that funding is available to pay the following bills:

BE IT RESOLVED that the Metropolitan Health Insurance Fund's Executive Board, hereby authorizes the Fund treasurer to issue warrants in payment of the following claims; and

FURTHER, that this authorization shall be made a permanent part of the records of the Fund.

FUND YEAR 2024			
	VendorName	Comment	InvoiceAmount
	PERMA	ADMIN FEES 11/24	40,707.00 40,707.00
	PERMA	POSTAGE 10/24	1,232.64 1,232.64
	PERM A	PROGRAM MANAGER 11/24	49,753.00 49,753.00
	MUNICIPAL REINSURANCE H.I.F.	SPECIFIC REINSURANCE 11/24	199,844.24 199,844.24
		TOTAL CHECKS 2024	291,536.88
		Total Payments FY 2024	291,536.88
FUND YEAR 2025			
	VendorName	Comment	InvoiceAmount
	<u>VendorName</u> THE CANNING GROUP LLC	Comment QPA METRO 2025-05	<u>InvoiceAmount</u> 166.67 166.67
			166.67
	THE CANNING GROUP LLC NJ ADVANCE MEDIA	QPA METRO 2025-05 A# 208875 INV 3010965-10972228 3/7/25	166.67 166.67 91.80 324.00
	THE CANNING GROUP LLC NJ ADVANCE MEDIA NJ ADVANCE MEDIA	QPA METRO 2025-05 A# 208875 INV 3010965-10972228 3/7/25 A# 208875 INV 3010965 AD 10972226 3/7/25	166.67 166.67 91.80 324.00 415.80 6,844.00
	THE CANNING GROUP LLC NJ ADVANCE MEDIA NJ ADVANCE MEDIA WELLNESS COACHES USA LLC	QPA METRO 2025-05 A# 208875 INV 3010965-10972228 3/7/25 A# 208875 INV 3010965 AD 10972226 3/7/25 WELLNESS COACHES INV 38917 04/25/25	166.67 166.67 91.80 324.00 415.80 6,844.00 6,844.00 57,798.49

AETNA HEALTH MANAGEMENT, LLC	MEDICARE ADVANTAGE 05/25	907,694.10 907,694.10
UNITED HEALTHCARE INS COMPANY	MEDICARE ADVANTAGE 05/25	87,703.85 87,703.85
DELTA DENTAL INSURANCE COMPANY	DENTAL- BE006536069 F1-787190000 5/25	5,319.24 5,319.24
FAIRVIEW INSURANCE AGENCY ASSOCIATES	BROKER FEES 05/25	34,274.35 34,274.35
ACRISURE NJ PARTNERS INS. SERVICES, LLC	BROKER FEES 05/25	46,370.38 46,370.38
AETNA	MEDICAL TPA FEES 05/25	95,489.10 95,489.10
EAGLE ROCK MANAGEMENT GROUP, LLC	FUND COORDINATOR 05/25	77,291.00 77,291.00
DELTA DENTAL OF NEW JERSEY INC.	DENTAL TPA FEES 05/25	6,252.48 6,252.48
POINT ACCOUNTING GROUP	TREASURER FEES 05/25	2,250.00 2,250.00
	TOTAL ACH	1,262,644.50
	Total Payments FY 2025	1,341,279.46
	TOTAL PAYMENTS ALL FUND YEAR	1,632,816.34

Chairperson

Attest:

Dated:

I hereby certify the availability of sufficient unencumbered funds in the proper accounts to fully pay the above claims.

Treasurer

		CERT	IFICATION AN	D RECONCILI	ATION OF CLAIN	IS PAYMENTS ANI	O RECO VERIES			
				Metro l	Employee Benefits	Fund				
Month Current	Month March Current Fund Year 2025									
		1. Calc. Net	2. Monthly	3. Monthly	4. Calc. Net	5. TPA Net	6. Variance	7. Delinquent	8. Change	
Policy		Paid Thru	Net Paid	Recoveries	Paid Thru	Paid Thru	id Thru To Be		Change This	
Year	Coverage	Last Month	March	March	March	March	Reconciled	Variance From	Month	
2025	Medical	4,941,619.82	4,475,189.88	0.00	9,416,809.70	0.00	9,416,809.70	4,941,619.82	4,475,189.88	
	Dental	156,633.33	134,017.10	0.00	290,650.43	0.00	290,650.43	156,633.33	134,017.10	
	Rx	550,333.12	332,713.10	0.00	883,046.22	0.00	883,046.22	550,333.12	332,713.10	
	Vision	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Total	5,648,586.27	4,941,920.08	0.00	10,590,506.35	0.00	10,590,506.35	5,648,586.27	4,941,920.08	

	Metro Employee Benefits Fund										
	SUMMARY OF CASH TRANSACTIONS - ALL FUND YEARS COMBINED										
Current Fund Year:											
Month Ending: 1			n	T 77 •			DCD		D D		
	Medical	Dental	Rx	Vision	Run-In	Reinsurance	RSR	Admin		BMED Interfund	TO TAL
OPEN BALANCE	3,907,372.23	157,489.59	(382,496.59)	0.00	0.00	1,252,665.37	381,908.82	991,008.10	0.00	0.00	6,307,947.52
RECEIPTS											
Assessments	6,545,365.89	124,470.57	255,136.19	0.00	0.00	227,776.74	72,121.03	551,773.94	0.00	0.00	7,776,644.36
Refunds	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Invest Pymnts	14,957.96	298.77	7.90	0.00	0.00	2,376.46	724.53	1,880.06	0.00	0.00	20,245.68
Invest Adj	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Subtotal Invest	14,957.96	298.77	7.90	0.00	0.00	2,376.46	724.53	1,880.06	0.00	0.00	20,245.68
Other *	32,102.01	0.00	39,876.95	0.00	0.00	0.00	0.00	0.00	0.00	0.00	71,978.96
TOTAL	6,592,425.86	124,769.34	295,021.04	0.00	0.00	230,153.20	72,845.56	553,654.00	0.00	0.00	7,868,869.00
EXPENSES											
Claims Transfers	5,471,954.98	136,347.60	332,713.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,941,015.68
Expenses	1,153,913.07	5,278.20	0.00	0.00	0.00	191,853.35	0.00	425,362.85	0.00	0.00	1,776,407.47
Other *	0.00	0.00	0.00	0.00	0.00	0.00	0.00	993.67	0.00	0.00	993.67
TOTAL	6,625,868.05	141,625.80	332,713.10	0.00	0.00	191,853.35	0.00	426,356.52	0.00	0.00	7,718,416.82
END BALANCE	3,873,930.04	140,633.13	(420,188.65)	0.00	0.00	1,290,965.22	454,754.38	1,118,305.58	0.00	0.00	6,458,399.70

Me	etro Employee Benefits Fund		
AI	L FUND YEARS COMBINED		
сι	JRRENT MONTH	March	
cτ	JRRENT FUND YEAR	2025	
		Description:	CHEC KING
		ID Number:	
		Maturity (Yrs)	
		Purchase Yield:	
		TO TAL for All	
		Accts & instruments	
01	oening Cash & Investment Balance	\$ 6,307,947.54	\$ 6,307,947.54
01	ening Interest Accrual Balance	\$-	\$ -
1	Interest Accrued and/or Interest Cost	\$0.00	\$0.00
2	Interest Accrued - discounted Instr.s	\$0.00	\$0.00
3	(Amortization and/or Interest Cost)	\$0.00	\$0.00
4	Accretion	\$0.00	\$0.00
5	Interest Paid - Cash Instr.s	\$20,245.68	\$20,245.68
6	Interest Paid - Term Instr.s	\$0.00	\$0.00
7	Realized Gain (Loss)	\$0.00	\$0.00
8	Net Investment Income	\$20,245.68	\$20,245.68
9	Deposits - Purchases	\$7,848,623.32	\$7,848,623.32
10	(Withdrawals - Sales)	-\$7,718,416.82	-\$7,718,416.82
En	ding Cash & Investment Balance	\$6,458,399.72	\$6,458,399.72
Ending Interest Accrual Balance		\$0.00	\$0.00
Plus Outstanding Checks		\$181,262.22	\$181,262.22
Plı		-\$1,308,579.00	-\$1,308,579.00
	ess Deposits in Transit)	+-,,,,	

RESOLUTION NO. 17-25

METROPOLITAN HEALTH INSURANCE FUND APPROVAL OF THE APRIL AND MAY 2025 BILLS LIST

WHEREAS, the Metropolitan Health Insurance Fund held a Public Meeting on May 15,2025 for the purposes of conducting the official business of the Fund; and

WHEREAS, The Treasurer for the Fund presented bills lists to satisfy outstanding costs incurred for operating the Fund during the month of April and May 2025 for consideration and approval of the Executive Committee and

WHEREAS, a quorum of the Commissioners was present thereby conforming with the Policies and Procedures of the Fund to conduct official business of the Fund,

NOW THEREFORE BE IT RESOLVED the of the Metropolitan Health Insurance Fund hereby approve the Bills List for April and May 2025 prepared by the Treasurer of the Fund and duly authorize and concur said bills to be paid expeditiously, in accordance with the laws and regulations promulgated by the State of New Jersey for Insurance Funds.

ADOPTED: May 15, 2025

BY:_

CHAIRPERSON

ATTEST:

SECRETARY



METRO CLAIMS

Monthly Claim Activity Report

May 15, 2025

		•	2	pt				
				TRO				
	MEDICAL CLAIMS				MEDICAL CLAIMS			
	PAID 2024	# OF EES	P	ER EE	PAID 2025	# OF EES	P	ER EE
JANUARY	\$724,016	2,682	\$	270	\$4,688,076	2,369	\$	1,979
FEBRUARY	\$3,974,566	2,658	\$	1,495	\$4,919,355	2,436	\$	2,019
MARCH	\$5,419,303	2,666	\$	2,033	\$5,699,838	2,426	\$	2,349
APRIL	\$6,007,197	2,624	\$	2,289				
MAY	\$4,346,049	2,630	\$	1,652				
JUNE	\$5,971,793	2,627	\$	2,273		、 、		
JULY	\$6,220,272	2,649	\$	2,348				
AUGUST	\$4,753,326	2,643	\$	1,798				
SEPTEMBER	\$4,750,184	2,627	\$	1,808				
OCTOBER	\$5,943,377	2,713	\$	2,191				
NOVEMBER	\$5,722,476	2,719	\$	2,105		_		
DECEMBER	\$6,521,762	2,118	\$	3,079				
TOTALS	\$60,354,319				\$15,307,268			
					2025 Average	2,410	\$	2,116
					2024 Average	2,613	\$	1,945

			74	
		F	RUN	JUT
	MEDICAL CLAIMS			
	PAID 2025	# OF EES	PER	EE
JANUARY	\$194,623	2,369	\$	82
FEBRUARY	\$106,504	2,436	\$	44
MARCH	\$67,081	2,426	\$	28
APRIL				
MAY				
JUNE				
JULY				
AUGUST				
SEPTEMBER				
OCTOBER				
NOVEMBER				
DECEMBER				
TOTALS	\$368,207			

Large Claimant Report (Drilldown) - Claims Over \$100000

 Plan Sponsor Unique ID:
 All

 Customer:
 METRO

 Group / Control:
 00232370,00232371 - METRO FUND

 Paid Dates:
 02/01/2025 - 02/28/2025

 Service Dates:
 01/01/2011 - 02/28/2025

 Line of Business:
 All

Paid Amt	Diagnosis/Treatment
\$207,314.55	SPINAL STENOSIS, THORACIC REGION
\$207,314.55	

Total:

Large Claimant Report (Drilldown) - Claims Over \$100000

Plan Sponsor Unique ID:AllCustomer:METROGroup / Control:00232370,00232371 - METRO FUND

 Paid Dates:
 03/01/2025 - 03/31/2025

 Service Dates:
 01/01/2011 - 03/31/2025

 Line of Business:
 All

Paid Amt	Diagnosis/Treatment
\$198,637.72	PAIN IN RIGHT LEG
\$166,040.63	SPONDY LOSIS WITHOUT MY ELOPATHY OR
\$151,531.75	SPONDY LOSIS WITHOUT MY ELOPATHY OR
\$132,559.43	SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC
\$129,884.80	NEUROPA THIC HEREDOFA MILIAL
\$112,785.26	SPINAL STENOSIS, THORACIC REGION
\$891,439.59	

Total:



Medical Claims Paid: January 2025 thru March 2025 Total Medical Paid per EE: \$2,116

Claims Run-Out under old BMED control

Network Discounts

65.0%
65.8%
63.1%
64.5%

Provider Network

% Admissions In-Network: 94.4% % Physician Office: 90.8%

Aetna Book of Business: Admissions 97.6%; Physician 91.9%

Top Facilities Utilized (by total Medical Spend)

- · Cooperman Barnabas Medical Ctr
- JFK University Medical Center
- · Overlook Medical Center
- · Hackensack University Medical Ctr
- RWJUH New Brunswick

January 2025 - March 2025 Number of Claims Over \$50,000: 36 Claimants per 1000 members: 6.5 Avg. Paid per Claimant: \$118,787 Percent of Total Paid: 29.0% Aetna BOB- HCC account for an average of 44.9% of total Medical Cost Aetna One Flex Member Outreach: Through March 2025 Total Members Identified: 1,754 Members Targeted for 1:1 Nurse Support: 394 Members Targeted for Digital Activity: 1,360 Member 1:1 outreach completed: 372 Member 1:1 Outreach in Progress: 22

Metropolitan Health Insurance Fund 2/1/24 thru 1/31/25 (unless otherwise noted)

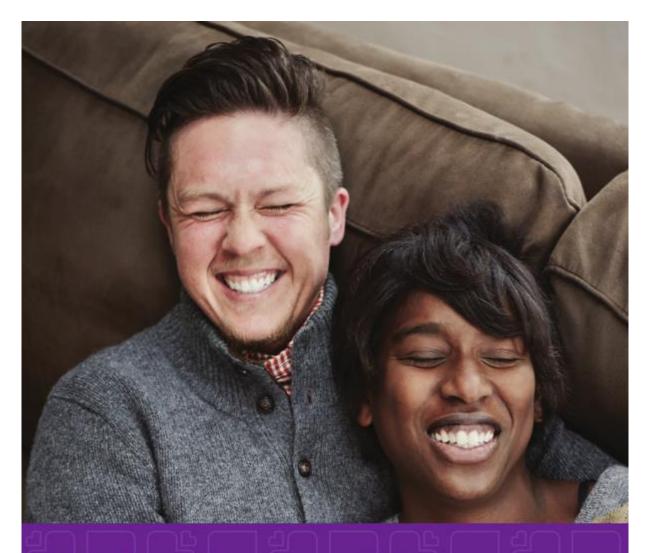
Catastrophic Claim Impact

CVS Health. CVS Virtual Care January 2025 - March 2025

Completed Visits in March: 12 Unique Patients in March: 10 Completed Visits in 2025 : 44 Unique Patients in 2025: 34 Total Scheduled Visits in 2025: 53

Average visit duration: 11 Minutes BoB Average First Available: 54 minutes

Service Center Perf Metrics YTE	
Customer Service	Performance
1st Call Resolution:	93.88%
Abandonment Rate:	0.45%
Avg. Speed of Answer:	15.2 sec
Claims Perfo	rmance
Financial Accuracy:	98.68%*
- 1	
90% processed w/in:	7.2 days
95% processed w/in:	14.9 days
Claims Performan (March 20	
90% processed w/in:	8.4 days
95% processed w/in: (Note: This is not a	
Performance	Goals
1 st Call Resolution:	90%
Abandonment Rate less	s than: 3.0%
Average Speed of Answ	ver: 30 sec
Financial Accuracy:	99%
Turnaround Time	
90% processed w/in:	14 days
95% processed w/in:	30 days



Right there with you

Aetna One® Flex

Aetna.com

Ongoing nurse support when you need it most

◆aetna[®]

Your health — both physical and mental — is everything. Whether you're managing a chronic condition or dealing with other complex health challenges, our nurses can help. If you're identified for care management, a nurse can work with you to put together a plan, help you understand your benefits offerings and answer your health-related questions.



One-on-one personalized nurse support

Our clinical nurses can collaborate with service teams to help you achieve your health goals. Our nurses are supported with a multidisciplinary team including a dietitian, pharmacist and transgender and gender-diverse advocate. Whether you want assistance for an emotional issue, advanced illness or transgender and gender-diverse support, we'll work with you and your family to provide guidance and support.



Local support

With CVS® and MinuteClinic® locations inside select CVS Pharmacy® and Target® stores, you have a broad range of services to keep you and your family healthy.

Through your Aetna® member website, you'll be able to locate a doctor, review your personal health record and watch informational health videos. And for specific health needs, you can explore member resources like the Cancer Support Center, Maternity Support Center, Back and Joint Care Support Center and Transgender and Gender-diverse Support Center.



Access to Information - whenever, wherever

Tools, tips and support centers

Always on the go? No problem. Your member website is fully mobile. Remember, this is your one-stop shop for getting the help you need. And when you download the Aetna Health[™] app, you can access it all from the palm of your hand.

Get started with these resources today.

Go to Aetna.com to log in to your member website.

Aetna[®] is the brand name used for products and services provided by one or more of the Aetna group of companies, including Aetna Life Insurance Company, and its affiliates (Aetna). Aetna, CVS Pharmacy[®] and MinuteClinic, LLC (which either operates or provides certain management support services to MinuteClinic-branded walk-in clinics) are part of the CVS Health[®] family of companies. Refer to <u>Aetna.com</u> for more information about Aetna plans.

Health benefits and health insurance plans contain exclusions and limitations.

This information is not intended to replace the advice of a doctor. Aetna is not responsible for the decisions you make based on this information. If you have specific health care needs or would like more complete health information, please see your doctor or other health care provider.

Target® is the property of Target Brands, Inc.

Aetna.com

©2024 Aetna Inc. 2860006-02-01 (01/24)



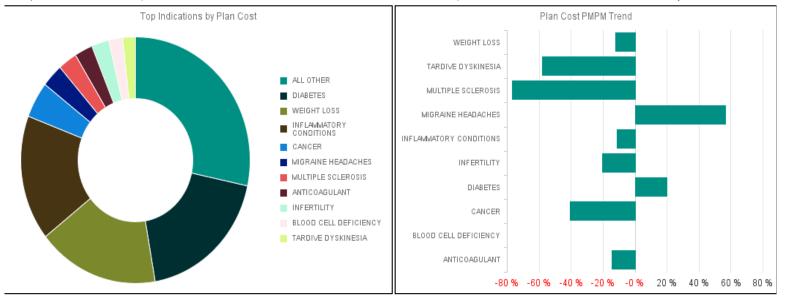


Metropolitan Health Insurance Fund

Total Component/Date of Service (Month)	2024 01	2024 02	2024 03	2024 Q1	2024 04	2024 05	2024 06	2024 Q2	2024 07	2024 08	2024 09	2024 Q3	2024 10	2024 11	2024 12	2024 Q4
Membership	972	963	960	965	970	965	957	964	946	947	952	948	968	990	984	981
Total Days	24,314	27,528	27,455	79,297	29,053	32,052	27,820	88,925	30,797	29,467	30,030	90,294	34,030	32,808	35,417	102,255
Total Patients	284	292	308	465	318	308	301	485	303	307	315	469	357	353	362	539
Total Plan Cost	\$153,801	\$106,316	\$117,731	\$377,849	\$138,031	\$171,454	\$156,213	\$465,697	\$205,353	\$187,823	\$167,234	\$560,409	\$274,108	\$179,016	\$214,628	\$667,752
Generic Fill Rate (GFR) - Total	86.2%	85.8%	86.1%	86.0%	86.5%	84.1%	84.0%	84.9%	83.7%	80.2%	80.4%	81.5%	81.2%	84.4%	81.9%	82.5%
Plan Cost PMPM	\$158.23	\$110.40	\$122.64	\$130.52	\$142.30	\$177.67	\$163.23	\$161.03	\$217.07	\$198.33	\$175.67	\$196.98	\$283.17	\$180.82	\$218.12	\$226.97
Total Specialty Plan Cost	\$80,389	\$23,717	\$27,003	\$131,108	\$54,301	\$37,700	\$48,055	\$140,057	\$76,068	\$71,220	\$48,563	\$195,851	\$161,184	\$53,548	\$70,817	\$285,549
Specialty % of Total Specialty Plan Cost	52.3%	22.3%	22.9%	34.7%	39.3%	22.0%	30.8%	30.1%	37.0%	37.9%	29.0%	34.9%	58.8%	29.9%	33.0%	42.8%

Total Component/Date of Service (Month)	2025 01	2025 02	2025 03	2025 Q1	2025 04	2025 05	2025 06	2025 Q2	2025 07	2025 08	2025 09	2025 Q3	2025 10	2025 11	2025 12	2025 Q4
Membership	1,583	1,745	1,738	1,689												
Total Days	59,833	60,373	70,384	190,590												
Total Patients	573	631	623	954												
Total Plan Cost	\$360,333	\$264,853	\$398,250	\$1,023,436												
Generic Fill Rate (GFR) - Total	85.1%	84.0%	82.7%	83.9%												
Plan Cost PMPM	\$227.63	\$151.78	\$229.14	\$202.02												
% Change Plan Cost PMPM	43.9%	37.5%	86.8%	54.8%												
Total Specialty Plan Cost	\$144,724	\$50,528	\$136,401	\$331,652												
Specialty % of Total Specialty Plan Cost	40.2%	19.1%	34.2%	32.4%												

Top Indications



Metropolitan Health Insurance (Current Period 01/2025 - 03/2025 vs. Previous Period 10/2024 - 12/2024) Peer = Government - National Preferred Formulary

					Current Per	iod			Previous Period								
Rank	Peer Rank	Indication	Market Share	Adjusted Rxs	Plan Cost	Plan Cost PMPM	GFR	Peer GFR	Market Share	Adjusted Rxs	Plan Cost	Plan Cost PMPM	GFR	Peer GFR	Plan Cost PMPM		
1	1	DIABETES	26.4 %	587	\$193,315	\$38.16	32.5 %	24.4 %	18.4 %	292	\$93,610	\$31.82	31.5 %	25.0 %	19.9 %		
2	4	WEIGHT LOSS	23.9 %	163	\$174,975	\$34.54	0.6 %	4.5 %	22.7 %	103	\$115,607	\$39.30	0.0 %	4.0 %	-12.1 %		
3	2	INFLAMMATORY CONDITIONS	23.0 %	83	\$168,271	\$33.22	62.7 %	31.1 %	21.6 %	35	\$110,053	\$37.41	40.0 %	30.7 %	-11.2 %		
4	3	CANCER	6.6 %	16	\$48,395	\$9.55	81.3 %	76.2 %	9.3 %	17	\$47,290	\$16.07	88.2 %	75.7 %	-40.6 %		
5	5	MIGRAINE HEADACHES	4.2 %	38	\$31,078	\$6.13	31.6 %	52.0 %	2.3 %	17	\$11,535	\$3.92	58.8 %	52.4 %	56.5 %		
6	7	MULTIPLE SCLEROSIS	3.7 %	3	\$27,452	\$5.42	0.0 %	48.2 %	13.5 %	12	\$68,719	\$23.36	50.0 %	49.3 %	-76.8 %		
7	6	ANTICOAGULANT	3.6 %	59	\$26,080	\$5.15	6.8 %	18.5 %	3.5 %	45	\$17,735	\$6.03	4.4 %	17.9 %	-14.6 %		
8	9	INFERTILITY	3.4 %	13	\$25,058	\$4.95	61.5 %	63.4 %	3.6 %	9	\$18,258	\$6.21	55.6 %	64.2 %	-20.3 %		
9	8	BLOOD CELL DEFICIENCY	2.7 %	3	\$19,973	\$3.94	0.0 %	1.4 %	NA		NA	NA	NA	0.3 %	NA		
10	10	TARDIVE DY SKINESIA	2.5 %	3	\$18,605	\$3.67	0.0 %	4.9 %	5.1 %	3	\$25,706	\$8.74	0.0 %	4.8 %	-58.0 %		
		Total Top 10		968	\$733,201	\$144.73	29.0 %	27.6 %		533	\$508,514	\$172.85	27.0 %	27.9 %	-16.3 %		

Top Drugs

Metropolitan Health Insurance (Current Period 01/2025 - 03/2025 vs. Previous Period 10/2024 - 12/2024) Peer = Government - National Preferred Formulary

					Current Period Previous Period								Trend
Rank	Peer Rank	Brand Name	Indication	Specialty Drug	Adjusted Rxs	Patients	Plan Cost	Plan Cost PMPM	Adjusted Rxs	Patients	Plan Cost	Plan Cost PMPM	Plan Cost PMPM
1	8	ZEPBOUND	WEIGHT LOSS	Ν	94	38	\$93,141	\$18.39	53	20	\$52,383	\$17.81	3.3 %
2	14	WEGOVY	WEIGHT LOSS	Ν	66	28	\$81,314	\$16.05	50	20	\$63,225	\$21.49	-25.3 %
3	185	SCEMBLIX	CANCER	Y	3	1	\$48,279	\$9.53	2	1	\$31,555	\$10.73	-11.1 %
4	1	MOUNJARO	DIABETES	Ν	44	17	\$43,642	\$8.61	16	7	\$15,963	\$5.43	58.8 %
5	4	OZEMPIC	DIABETES	Ν	48	17	\$42,230	\$8.34	35	12	\$30,650	\$10.42	-20.0 %
6	35	SKY RIZI ON-BODY	INFLAMMATORY CONDITIONS	Y	4	1	\$37,557	\$7.41	4	1	\$41,488	\$14.10	-47.4 %
6	15	SKY RIZI PEN	INFLAMMATORY CONDITIONS	Y	6	1	\$37,557	\$7.41	3	1	\$14,521	\$4.94	50.2 %
8	11	JARDIANCE	DIABETES	Ν	57	17	\$32,473	\$6.41	21	6	\$11,668	\$3.97	61.6 %
9	115	VUMERITY	MULTIPLE SCLEROSIS	Y	3	1	\$27,452	\$5.42	6	1	\$36,637	\$12.45	-56.5 %
10	88	PROMACTA	BLOOD CELL DEFICIENCY	Y	2	1	\$19,333	\$3.82	NA	NA	NA	NA	NA
11	169	INGREZZA	TARDIVE DY SKINESIA	Y	3	1	\$18,605	\$3.67	3	1	\$25,706	\$8.74	-58.0 %
12	18	RINVOQ	INFLAMMATORY CONDITIONS	Y	2	1	\$17,831	\$3.52	NA	NA	NA	NA	NA
13	27	ELIQUIS	ANTICOAGULANT	Ν	37	9	\$16,260	\$3.21	28	5	\$9,862	\$3.35	-4.2 %
14	33	NURTEC ODT	MIGRAINE HEADACHES	Ν	10	6	\$15,876	\$3.13	4	2	\$7,607	\$2.59	21.2 %
15	211	SOTYKTU	INFLAMMATORY CONDITIONS	Y	3	1	\$14,325	\$2.83	NA	NA	NA	NA	NA
16	187	HUMIRA(CF)	INFLAMMATORY CONDITIONS	Y	3	1	\$14,000	\$2.76	NA	NA	NA	NA	NA
17	22	HUMIRA(CF) PEN	INFLAMMATORY CONDITIONS	Y	3	1	\$14,000	\$2.76	3	1	\$19,999	\$6.80	-59.3 %
18	24	FARXIGA	DIABETES	Ν	24	8	\$12,897	\$2.55	3	1	\$1,368	\$0.46	447.6 %
19	133	GONAL-F RFF REDI-JECT	INFERTILITY	Y	2	2	\$11,283	\$2.23	1	1	\$8,467	\$2.88	-22.6 %
20	32	TRULICITY	DIABETES	Ν	12	4	\$10,954	\$2.16	9	3	\$8,197	\$2.79	-22.4 %
21	190	ACTEMRA ACTPEN	INFLAMMATORY CONDITIONS	Y	3	1	\$10,303	\$2.03	3	1	\$10,303	\$3.50	-41.9 %
22	203	MENOPUR	INFERTILITY	Y	2	2	\$10,157	\$2.00	1	1	\$7,090	\$2.41	-16.8 %
23	7	STELARA	INFLAMMATORY CONDITIONS	Y	3	1	\$10,070	\$1.99	NA	NA	NA	NA	NA
24	44	XARELTO	ANTICOAGULANT	Ν	18	6	\$9,797	\$1.93	15	4	\$7,781	\$2.64	-26.9 %
25	42	QULIPTA	MIGRAINE HEADACHES	Ν	9	3	\$9,252	\$1.83	3	1	\$3,119	\$1.06	72.2 %
			Tot	al Top 25	461		\$658,588	\$130.00	263		\$407,590	\$138.54	-6.2 %

A DELTA DENTAL

Claims Summary

METROPOLITAN HEALTH INSURANCE FUND - 03606

January 2024 - December 2024

Cost Containment

Claims	Dollars	Definition
Submitted Claims	\$3,448,910	Claims submitted by participating and non-participating dentists
(-) Savings		
(-)Network Discount	\$1,137,592	Savings from network participating dentist discounts
(-)Administrative	\$507,970	Contract limits, non-covered, non-billable services, optional services
(-)Dental Consultant	\$19,048	Clinical claim review by dental consultants
(-)Eligibility Verification	\$12,259	Claims for in-eligible members
(-)COB	\$95,832	Coordination of benefits
(-)Other	\$578,989	Deductibles, patient coinsurance
(=)Total Savings	\$2,351,689	
Delta Dental Paid	\$1,097,222	Amount paid by Delta Dental

Network Discount

Network	Submitted Claims	Paid Claims	Network Discount	Network Discount / Submitted Claims	
Total Network Discount	\$3,183,066	\$1,048,303	\$1,137,592	35.74%	
Out of Network	\$265,844	\$48,919			
Total	\$3,448,910	\$1,097,222	\$1,137,592		

Everyone Deserves a Healthy Smile

APPENDIX I

METROPOLITIAN HEALTH INSURANCE FUND MINUTES OPEN MEETING: MARCH 20, 2025 CONFERENCE CALL – ZOOM 11:00 A.M.

Meeting called to order by Chair Mundell. The Open Public Meeting Notice was read into the record.

PLEDGE OF ALLEGENCE

ROLL CALL OF 2025 EXECUTIVE COMMITTEE

Jenny Mundell, Chairwoman	Bloomfield Public Library	Present
Kimberly Duva, Secretary	Bloomfield Township	Absent
Cameron Cox, Executive Committee Member	Plainfield Public Schools	Present
Nicole Baltycki, Executive Committee Member	West Caldwell Township	Present
Chris Hartwyk, Executive Committee Member	City of Orange	Present
Margaret Heisey, Executive Committee Member	Scotch Plains Twp	Present
Patrick Wherry, Executive Committee Member	Maplewood Township	Present

APPOINTED OFFICIALS PRESENT:

Executive Director/	PERMA Risk Management	Emily Koval, Associate
Administrator	Services	Executive Director
		John Lajewski, PERMA
Fund Coordinator	Eagle Rock Management	Joseph DiVincenzo
	Group	Jennifer McHugh
		Thomas Kelly
		Diane Romano
Attorney	Antonelli Kantor Rivera	Larry Teijido
Treasurer	Point Accounting Group	Matt Laracy
	(Formerly Laracy Associates)	
Third Party	Aetna	Jason Silverstein
Administrator		
Dental Claims	Delta Dental of NJ, Inc.	Absent
Administrator		
Auditor	Donohue, Gironda, Doria &	Absent
	Tomkins	
Actuary	John Vataha	Absent
RX Administrator	Express Scripts	Charles Yuk

APPROVAL OF MINUTES: January 16, 2025 Open

Motion:	Commissioner Cox
Second:	Commissioner Wherry
Vote:	All in Favor

CORRESPONDENCE - None

EXECUTIVE DIRECTOR'S REPORT

FAST TRACK FINANCIAL REPORT - The Associate Executive Director began by addressing the financial fast track through December 2024, noting that it shows a loss for the year, as had been anticipated. However, Fund Year 2024 ended in a better position than 2023, primarily due to actions taken by the Committee last year. The Fund Treasurer will provide further details regarding cash and claims for the first two months of the year, but it was noted that cash appears to be stable.

2024 YEAR END FINANCIAL REVIEW

Due to scheduling issues, the Finance Committee was unable to meet regarding the year-end financials. A PowerPoint presentation was included in the meeting materials, which covered three key topics: the financial status as of December 31, utilization and trends for medical and prescription, and recommendations for cost-saving measures that can be used during union negotiations. The Executive Director expressed the intention to reschedule this meeting to revisit these discussions.

The presentation highlighted challenges faced by the Fund, as well as other New Jersey funds, including higher out-of-network utilization and hospital negotiations, particularly with Hackensack. It was noted that actions taken by the Fund last year are helping to address these issues. On the pharmacy side, GLP1 drugs continue to drive costs, accounting for more than 50% of the pharmacy trend. The Omada program, implemented in September, is expected to help reduce these costs. Additionally, there has been an increase in high-cost cancer drugs.

The Executive Director deferred to new team members, Matt Rudman and John Lawjewski, to address any points that may have been missed.

WELLNESS PROGRAM VENDOR RFP

The Wellness Program Vendor RFP responses were received earlier this month. The Fund Coordinator will be addressing next steps in his report. **MEDICAL TPA AND PBM RFPS**

Mrs. Koval reviewed Resolution 15-25, requesting authorization to go out for RFP at the local fund level for Medical TPA and Pharmacy Benefits Manager. While the Fund is currently a member of the pricing cooperative, which is the preferred procurement method to leverage the mass scale of all Funds, delays at the Comptroller's Office may necessitate an alternative route.

Authorization was requested, with the understanding that if the cooperative option prevails, changes will be revisited in May.

QPA RFF – Mrs. Koval stated that last year, the Fund approved a release of quotes for the QPA at the local Fund through the end of 2024. We recommend continuing the services of a QPA for the RFPs to go out this year, particularly for some of the larger contracts. Due to the expected cost of the QPA, we are requesting to go out for quotes for 2025. It was noted that in 2024, the QPA conducted an RFP for the electronic platform for Fund bids. However, all responses included fees that the Fund had not previously paid or budgeted for, leading to the decision to return to in-person openings.

Motion to allow PERMA to go out for quotes for QPA services.

Motion:	Commissioner Cox
Second:	Commissioner Wherry
Vote:	All in Favor

E-PROCUREMENT RFP RESULTS - Mrs. Koval stated that as per the resolution approved at the December meeting, the Fund went out for competitive contract bids for the E-Procurement platform. The 2025 Budget did not include a line for this service as it was not current expense. Therefore, the QPA recommended the rejection of bids based on price. The Funds will not use on online bidding platform going forward and all openings will be live at the Fund office.

PROGRAM MANAGERS REPORT

Mr. Lajewski reviewed the Program Manager report in Mrs. Bailey's absence.

Eligibility/Enrollment:

Please direct any eligibility, enrollment, or system related questions to our dedicated Client Services Team:

- Alexander Koch, <u>akoch@permainc.com</u>, 856-552-4478
- Victoria Friday: <u>vfriday@permainc.com</u>, 856-552-4748

System training (new and refresher) is provided to all contacts with WEX access **every 3**rd **Wednesday at 10AM**. Please contact <u>HIFtraining@permainc.com</u> for additional information or to request an invite.

Coverage Updates:

Express Scrips Updates:

2025 Formulary and SaveOn Listing

Brokers were sent the 2025 Formulary and SaveOn listings on November 11th. Please reference the appendix for the listings. Please note the following:

NPF Listing:

- NPF Exclusions Listing, please note the following:
 - Humalog excluded for members with a new prescription as of 1/1/25, members currently taking the drug will be excluded effective 1/1/26
 - Members should share the covered preferred alternatives provided in the listing with their providers
 - Humira excluded for members with a new prescription as of 1/1/25, members currently taking the drug will be excluded effective 7/1/25
 - Members should share the covered preferred alternatives provided in the listing with their providers
 - Impacted members will be notified by ESI. The notification will include covered preferred alternatives under the NPF

Encircle Program (GLP-1 Weight Loss)

Effective September 1, 2024:

- Members with new prescriptions, including renewal prescriptions for expired prior authorizations (PA), will need to meet the following criteria to be approved for a GLP-1 weight loss medication:
 - \circ BMI \geq 32 OR
 - BMI between $27 \le 32$ WITH 2 or more documented comorbidities
- Members with an active approved PA prior to 9/1/2024 will be grandfathered
 - Upon renewal of their PA, members will need to meet the above BMI requirements to be considered for approval
- PA renewals will need to include documentation to support the above BMI requirements for all members, regardless of members have been approved in the past.

Effective January 1, 2025:

Members who have an approved PA (active and new) will need to meet the following guidelines:

- Members will receive a welcome kit from Omada free of charge. The kit includes a digital scale and information on downloading the mobile app and/or using the web browser. The scale is programmed to the member's ESI active account prior to delivery. The scale will record each weigh-in and will update the member's file automatically. Members must weigh-in a minimum of 4 times a month
- Members must engage with an assigned online Omada coach via a mobile

If members do not adhere to both of the requirements outlined above, the following month in which they are non-compliant, they will not be able to refill their weight loss prescription. Members will be required to complete the missing weigh-ins and/or online coaching engagement in order to refill their prescription.

2025 LEGISLATIVE REVIEW:

Gag Clause Prohibition Compliance Attestation - no updates

Medical and Rx Reporting: None

No Surprise Billing and Transparency Act- Continued Delays

Appeals: - NONE

Mr. Lajewski stated that they are working on a monthly report that will be presented at each meeting that really digs into the claims and costs.

FUND COORDINATOR – Mr. DiVincenzo stated that there are two pending groups interested in joining the METRO HIF Jersey City Medicare population and Neatly Public Schools. He stated that these two groups are still in the works. Mr. DiVincenzo reviewed the wellness efforts. He stated that it may not be in the best interest of the fund – population health platform – care navigation and catastrophic cases such as cancer. He stated that he believes we should table the wellness and look into a population health platform for July 1, 2025 or January 1, 2026. He stated that there is great success in the SHIF and Coastal HIFs with this. Mrs. Koval stated that there is a resolution 14-25 for rejecting the wellness RFP results.

<u>ATTORNEY</u> – No Report. Asia Hartgrove introduced herself as a new member of the attorneys team.

<u>**TREASURER**</u> – Mr. Laracy presented the treasurers report discussing the January, February and March bills list. Mr. Laracy stated that there are still a few March outstanding

MOTION TO APPROVE RESOLUTION 15-25:

Motion:	Commissioner Wherry
Second:	Commissioner Cox
Vote:	7 Ayes, 0 Nays

AETNA – Mr. Silverstien was absent – report is included in the agenda.

EXPRESS SCRIPTS – Mrs. Patel reviewed the monthly utilization report through the month of January 2025. She reviewed the top 10 conditions, noting the top three conditions are weight loss, diabetes, and inflammatory conditions. Mrs. Patel reviewed the top 10 drugs.

DELTA DENTAL – Crista O' Donnell reviewed the Fund year 2024 Claims Summary and network utilization.

CONSENT AGENDA:

Resolution 14-25: Rejecting Wellness Vendor RFP Resolution 15-25: Authorizing release of Medical TPA and PBM RFP Resolution 16-25: Approval of the January, February and March 2025 Bills List

Motion:	Commissioner Hartwyk
Second:	Commissioner Cox
Vote:	6 Ayes, 0 Nays

OLD BUSINESS: - None

NEW BUSINESS: - None

PUBLIC COMMENT: - None

MEETING ADJOURNED

Motion:Commissioner CoxSecond:Commissioner Wherry

MEETING ADJOURNED: 11:30pm

NEXT MEETING: May 15, 2025 12:00PM

Zoom

Jordyn Robinson, Assisting Secretary

for

KIMBERLY DUVA, SECRETARY

APPENDIX II

Metropolitan Health Insurance Fund Savings Report Claims with Invoice Dates Between 3/1/2024 and 12/31/2024



Therapeutic Category	Adjudicated Amount	Participant Savings	Total Tertiary	Net Savings 75%	\$ Save per Claim	\$ Save PPPM	Claim Count	Participants
Grand Total	\$132,427	\$2,850	\$35,444	\$70,600	\$1,908	\$784	37	9
nflammatory Conditions	\$76.130	\$1.750	\$33.534	\$30.634	\$1.225	\$511	25	6
Miscellaneous Diseases	\$19,222	\$600	\$1,910	\$12,534	\$1,791	\$1.253	7	1
Multiple Sclerosis	\$23.552	\$300	so	\$17,439	\$5,813	\$1,744	3	1
Cancer	\$13.524	\$200	\$0	\$9.993	\$4,996	\$999	2	1

Participant Count vs. \$ Save Per Participant Per Month (PPPM)



*PPPM - Per Participant Per Month

SaveOnSP I HIGHLY CONFIDENTIAL I January 3, 2025

Therapeutic Category Drug Name		Net Savings 75% Participants		Otezia \$12,457		mra 02	Vumerity \$17,439
Inflammatory Conditions	Otezia	\$12,457.04	2	•			
	Actemra	\$9.402.15	1	•			
	Skyrizi	\$5,850.00	2	•			
	Humira	\$2,925.00	1	Skyrizi \$5,850		Humira \$2.925	
Multiple Sclerosis	Vumerity	\$17.439.35	1	Ingrezza \$12,534			icemblix 19.993
Miscellaneous Diseases	Ingrezza	\$12,534.00	1	312.534			
Cancer	Scemblix	\$9,992.63	1	-			

Savings Report: Definition of Terms

(includes only claims invoiced through the SaveonSP program during the reporting period)

Adjudicated Amount: Total copay the prescription adjudicated for with Express Scripts, and therefore, amount billed to the manufacturer's copay assistance program.

Participant: Patient enrolled in SaveonSP program with a claim filled during the reporting time period

Participant Savings: Average member copay prior to SaveonSP program implementation

Total Tertiary: Used for residual member cost after copay assistance pays (\$5-\$50 generally), member's 13th fill in the year, or pass through copays

Gross Savings: Adjudicated Amount Minus Credit for Prior Copay Minus Tertiary remaining balance Minus Residual Tertiary

Net Savings: Gross Savings x 75%

Carrier Number: 94Q6